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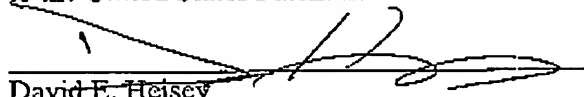
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Telephone No.From: David E. HeiseyRe: Patent Application Serial No. 10/639,143 – Revocation/Power of AttorneySender's Name: Pridge McDougall

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1. Transmittal (1 pg.); and
2. Revocations of Power of Attorney with New Powers of Attorney and
Changes of Correspondence Address (2 pp.)

Applicant:

Yanon VOLCANI et al.

Title:

SYSTEM AND METHOD FOR DETERMINING AND...

Serial No.:

10/639,143Filed: August 11, 2003

Examiner:

TBA

Group Art Unit: 2171

Our Docket No.:

11CF-123022Date Faxed: 5/4/06

Client:

Volcani

Date Due: N/A

Atty/Sec.:

Heisey/McDougall

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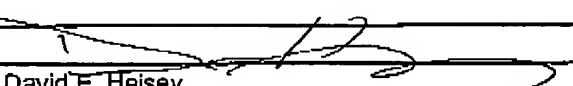
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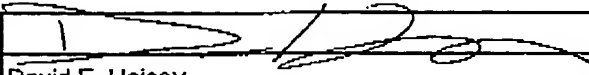
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/639,143	
	Filing Date	August 11, 2003	
	First Named Inventor	Yanon VOLCANI et al.	
	Art Unit	2171	
	Examiner Name	TBA	
Total Number of Pages in This Submission	3	Attorney Docket Number	11CF-123022 (formerly 28845-1/P08)

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Firm Name	Sheppard Mullin Richter & Hampton, LLP	
Signature		
Printed name	David E. Heisey	
Date	May 4, 2006	Reg. No. 42,651

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number: 10/639,143
Filing Date: 08/11/2003
First Named Inventor: Yanon Volcani
Art Unit: 2171
Examiner Name: TBA
Attorney Docket Number: 11CF-123022 (formerly 28845-1/P08)

I hereby revoke all previous powers of attorney given in the above identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 30764

☒ Please change the correspondence address for the above identified application to:

☒ The address associated with Customer Number: 30764

OR

☐ Firm or Individual Name

Address

City State Zip

Country

Telephone Email

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature: [Signature]

Name: Yanon Volcani

Date: 04/13/06 Telephone: 858/1454-6484

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/639,143
	Filing Date	August 11, 2003
	First Named Inventor	Yanon VOLCANI et al.
	Art Unit	2171
	Examiner Name	TBA
	Attorney Docket Number	11CF-123022 (formerly 28845-1/P08)

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

David B. Fogel

Date

May 3, 2006

Telephone

(858) 455-6449

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